PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

FORM - 0004

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			19	19		·		RATE	FEE	OR 7	RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	+	OR		
TO	OTAL CHARGE	ABLE CLAIMS	/9 minus 20=		•			XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 m	inus 3 =	•	_		X43=		OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	PRESENT					+145=		OR		
* [f the differenc	e in column 1 is	less than z	ero, enter	"0" in (column 2	ı	TOTAL	385	OR	TOTAL	
	(CLAIMS AS A	MENDE	_		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
	(Column 1)			(Column 2) HIGHEST		(Column 3)	, 7 r		, 	7		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AUA	-		X43=		OR	X86=	
	PIRST PRESI	ENTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	A	DDIT. FEE] • · · · /	ADDIT. FEE	
		CLAIMS		HIGHE		(Coldinii 3)			4501	1 r		
AMENDMENT B		REMAINING AFTER AMENDMENT	•	NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	FAIDENT C	N A 13 4	=		X43=	,	OR	X86=	
	TINOT PRESE	MIATION OF MO	CIIPLE DEF	EINDEINI	LAIM		Γ	+145=		OR	+290=	
								TOTAL DDIT. FEE	·	OR ,	TOTAL DDIT. FEE	
		(Column 1)		(Column	n:2)	(Column 3)					DD11. 1 CC	
]	`	CLAIMS		HIGHES		,00,0,,,,,,	r ·		4001	г		4884
<u>z</u> -		REMAINING AFTER AMENDMENT	·	NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740-		OR	700-	
								145=		OR	+290=	
If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
T	the "Highest Nur he "Highest Num	mber Previously Pai ber Previously Paid	d For" IN THIS For" (Total or I	SPACE is le	ess than) is the h	3, enter "3." iighest number (DIT. FEE L. in the appr	opriate box			